| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | | Application Number Filing Date | 10/730,64 Decembe | 19 |
|--|---|-------------------------|---|------------------------------|---|
| | | | First Named Inventor Art Unit Examiner Name | Scherzer 2664 Mew, Key | |
| Total Number of Pages in This Submission | | | Attorney Docket Number | Colubris (| 009 |
| | | ENC | LOSURES (Check all | that appl | <i>y</i>) |
| Amendm A A Extension Express Information Certified Documer Reply to Incomple | Missing Parts/ te Application eply to Missing Parts nder 37 CFR 1.52 or 1.53 | Rema | | Address | Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Statement Under 37 CFR 3.73(b) |
| Firm Name | Law Office & David H. Juds | | OF APPLICANT, ATTO | KNET, C | JR AGENT |
| Signature | Law Office of David H. Juds | \$\frac{1}{2}\tag{1}{2} | $\overline{}$ | | |
| Printed name | David H. Judson | 1 | | - | |
| Date | November 28, 2005 | | | Reg. No. | 30,467 |

November 22 2005

Typed or printed name

David H. Judson

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

Date November 28, 2005

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Red ons are required to respond to a collection of information unless it displays a valid OMR control number Effective PADE 2004 Complete if Known Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). Application Number 10/730.649 FEE TRANSMITTA Filing Date December 8, 2003 For FY 2005 First Named Inventor Scherzer **Examiner Name** Mew, Kevin D. Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2664 **TOTAL AMOUNT OF PAYMENT** 700.00 Attorney Docket No. Colubris 009 METHOD OF PAYMENT (check all that apply) ✓ | Check | Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) √ | Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fees Pald (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 160 150 80 Reissue 300 500 150 250 600 300 Provisional 200 100 n 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee Paid (\$) Fee (\$) **Multiple Dependent Claims** - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) 100 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets **Extra Sheets** Number of each additional 50 or fraction thereof Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): SUBMITTED BY Registration No. Signature Telephone 972-385-2018 30.467 (Attorney/Agent) Name (Print/Type) David H. Judson

This collection of information is required by 37 SER 1/136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.